

# **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000039376

Entity Name: MARILYN STAAB, INC.

**FILED**  
**Apr 28, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

3617 CROWN PT RD STE #2  
JACKSONVILLE, FL 32257

## **New Principal Place of Business:**

## **Current Mailing Address:**

3617 CROWN PT RD STE #2  
JACKSONVILLE, FL 32257

## **New Mailing Address:**

P O BOX 24668  
JACKSONVILLE, FL 32241

FEI Number: 30-0178476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

GREEN, KEVIN  
3617 CROWN PT RD STE #2  
JACKSONVILLE, FL 32257 US

## **Name and Address of New Registered Agent:**

M A HERNANDEZ TAX INC  
3617 CROWN PT RD STE #2  
JACKSONVILLE, FL 32257 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KEVIN GREEN

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: DPTS ( ) Delete  
Name: STAAB, MARILYN  
Address: P.O.BOX 24668  
City-St-Zip: JACKSONVILLE, FL 32241

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARILYN STAAB

P

04/28/2007

Electronic Signature of Signing Officer or Director

Date